

OHIP



Traveller's guide outside Canada

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This booklet is for Ontario residents who intend to travel outside Canada. Whenever you leave the country, please keep it with you for handy reference.

What you should know before leaving Ontario

The Ontario Health Insurance Plan provides benefits for necessary health care anywhere in the world. As long as your coverage is up to date, OHIP will help pay for your health care costs whenever you are sick or injured.

OHIP pays specific amounts for various types of physician and practitioner services. These are set out in a detailed document called the *OHIP Schedule of Benefits*.

In Ontario, a system is in place to pay for your health care, and you seldom see a bill. However, outside Canada some hospitals and most physicians and other health care professionals do not bill OHIP directly. You must pay the bill yourself and submit a claim to your local OHIP office for reimbursement. You will find details for submitting claims to OHIP on pages 9 and 11.

Health services provided outside Canada often cost more than the amounts paid by OHIP. Sometimes that amount is substantial, and you will be responsible for the difference in cost. Therefore, before you leave Ontario, you should consider getting private insurance to pay for the cost of services not covered by OHIP.

If you have health problems that might require special services, or you need more detailed information, call or visit your local

OHIP office before you travel. You will find the address and telephone number at the end of this brochure.

Note: Since you can't always anticipate when you will need health care, you should carry your OHIP card with you at all times.

If you plan to be away for more than three months

If you plan to be temporarily away from Ontario for more than three months, for example on a job assignment, to attend school or for an extended vacation, you must notify OHIP, or you may place your coverage in jeopardy.

To make arrangements for continued coverage for an absence of more than three months, your local OHIP office will need to know:

- the reason for your stay outside the province,
- when you plan to leave, and
- when you plan to return.

A note for new or returning residents

You must have been a resident of Ontario for 12 consecutive months in order to be eligible for OHIP benefits while you are outside the province for extended periods. This applies to new residents as well as to former residents who have moved back to Ontario.

Physicians' and practitioners' services

OHIP pays specific amounts for various types of health care service provided by physicians, dentists, chiropractors, osteopaths, optometrists and chiropodists/podiatrists.

Wherever you travel, OHIP pays for services performed by licensed physicians. However, their fees, especially in the United States, are often much higher than the amounts OHIP pays, and you will be responsible for the difference.

Before you leave Ontario, we recommend that you get private insurance to pay for costs beyond the amounts paid by OHIP. Your travel agent can help you make arrangements for private insurance.

OHIP also covers certain costs for necessary treatment provided by other health care practitioners. Services provided by those osteopaths licensed to practise medicine are paid for in the same manner as physicians' services. Certain dental services performed in a hospital may be covered, and chiropractor and chiropodist/podiatrist services are covered up to a limited amount. For more details get in touch with your local OHIP office.

Paying for physician or practitioner services

When you are outside Canada you will probably have to pay physicians' and other health

practitioners' fees yourself, and collect from OHIP later.

Make sure you receive an itemized statement listing all services that have been performed. Keep a copy for your own records and send the original bill to your local OHIP office within six months of the date of treatment.

You will find an explanation about how to submit a claim for reimbursement from OHIP on pages 9 and 10.

Hospital services

In a medical emergency, such as an accident, stroke, heart attack or diabetic coma, OHIP will pay for 100 per cent of insured hospital services, i.e., standard ward room and board, drugs, X-rays. If you choose to receive hospital services that you could have had in Ontario, OHIP will pay benefits at 75 per cent of the charges for insured services. As in Ontario, extra services such as a private or semi-private room are not covered.

Upon discharge, out-patient services such as physiotherapy and speech therapy are covered only when you must continue your treatment at a hospital. Renal dialysis services on an out-patient basis are an exception, and the rates charged are fully covered by OHIP. In any of these cases the treatment must be prescribed by a physician.

It is important to note that OHIP covers costs for services provided by registered or approved hospitals only, not health spas. You

will need private insurance to cover these expenses and any other services not covered by OHIP.

Important note:

If you choose to go outside Canada for medical care

If you choose to go outside Canada specifically for medical or surgical procedures, you should contact OHIP about what benefits will be paid. Prior contact with OHIP will clearly define both the patient's and OHIP's financial responsibilities and will avoid unexpected financial hardship. OHIP is required by law to pay no more than the amount listed in the Ontario *Schedule of Benefits*.

If you are referred outside Canada for medical care

If your Ontario physician plans to refer you for care outside Canada, authorization is required from OHIP prior to your leaving Ontario for the service. OHIP will determine if the service is available in Ontario or listed in the *Schedule of Benefits* and advise you of their payment policies. This will clarify your financial responsibilities in the procedures involved.

Nursing homes and chronic care facilities

Under certain conditions, treatment in a nursing home or chronic care facility outside Ontario is an insured benefit for up to 60 days. The patient must be transferred to such a facility from an approved hospital, and the attending physician in the hospital must

recommend the facility in writing and certify that the patient is unable to travel to Ontario. Benefits are paid at 100 per cent of the rate charged for insured services where the initial treatment was for a medical emergency or for a service unavailable in Ontario when your approval was arranged with OHIP. If you choose to receive the initial treatment that you could have had in Ontario, services are paid at 75 per cent of the rate charged for insured services.

In either case, benefits may be extended for an additional 60 days when certified by a physician as medically necessary.

Paying for hospital services

Some hospitals in the United States will accept your OHIP card. On your behalf, OHIP will settle the account directly with the hospital.

If your coverage must be verified, have the hospital contact the OHIP office nearest your home address.

In other parts of the world, and in many hospitals in the United States, you will be expected to pay your hospital bill upon discharge. For reimbursement from OHIP, you will need an itemized hospital bill and a receipt. Keep copies for your records and send the originals to OHIP.

You will find an explanation of how to submit a claim for reimbursement from OHIP on page 11.

***Keep this card in your wallet
when you are travelling.***

It lists details OHIP will need when you
claim for health care received outside
Ontario.

OHIP

Outside Canada claim checklist

**OHIP needs these details
when you submit claims for
health care outside Canada.**

If you receive health care from
a physician or hospital which
does not deal directly with
OHIP, you will have to pay for
these services.

Private insurance is necessary
to cover health care costs not
covered by OHIP outside
Canada.

For reimbursement from OHIP,
submit a claim and original
receipts to your local OHIP
office within six months of the
treatment date. Keep copies for
your files.

**For more details, consult an
OHIP Traveller's Guide or
your local OHIP office.**

Please include the following information with your OHIP claim:

Personal Information

- ☒ The family name, initials, and the OHIP number shown on your OHIP identification card.
- ☒ Your Ontario address and, if different, the address to which payment should be sent, and your daytime telephone number.
- ☒ The patient's name, sex, date of birth, and relationship to the OHIP subscriber.

Information from your physician or practitioner

- ☒ The full name, address and telephone number of the physician/practitioner.
- ☒ The diagnosis, and descrip-

tion of all medical services provided.

- ☒ The dates and number of services.
- ☒ The fee charged for each service.

Information from the hospital

Submit the hospital's itemized statement, the referring physician's name and, if required, a medical certificate. The hospital statement should include:

- ☒ The dates of the patient's admission to hospital and discharge.
- ☒ The admitting diagnosis.
- ☒ Time spent on administration of anesthesia or assistance at surgery.

Note: In case of long-term illness, contact your local OHIP office concerning continued coverage.

If you need an ambulance

When the use of an ambulance outside Ontario is medically necessary, OHIP may reimburse you at 75% of the amount charged.

To claim the cost of ambulance service outside of Ontario or to Ontario, there must be a demonstrated need for the patient to be confined to a stretcher or for a medical attendant to accompany the patient during the journey. Costs for transportation from Ontario to another province or country may be claimed only when the transfer is necessary for medical services not available in Ontario, with prior approval.

For reimbursement from OHIP for the use of a land ambulance, you will need to submit proof of payment, along with an itemized statement from the ambulance facility, indicating the pick-up point, destination, mileage and cost, and a medical certificate that states the transfer was necessary and appropriate. Keep copies for your records and send the original receipts to OHIP.

Before an air ambulance is used, a provincial ambulance service or a licensed physician must contact Ontario's central ambulance authority for approval. The number to call for information and assistance is (416) 965-1211

Costs for transportation to Ontario from another country via air ambulance may be reimbursed only when the patient is admitted directly to a hospital in Ontario.

In the case of an air ambulance, original medical reports or certificates from both the dispatching and receiving physicians and proof of payment are needed. Air ticket vouchers or air charter invoices are also required.

Services not covered by OHIP

The following services are not insured by OHIP in Ontario or elsewhere:

- Care in health spas or similar facilities;
- Any hospital charges for private or semi-private accommodation;
- Hospital visits solely for the administration of drugs;
- Charges for dental care, except as specified in the OHIP *Dental Schedule of Benefits* and where the service was rendered in an approved hospital;
- Eyeglasses, artificial limbs, crutches, special braces and other such aids, except as designated by the Ministry of Health's Assistive Devices Program;
- Private-duty nursing, except when ordered and verified in writing by a physician;
- Prescription drugs, or drugs taken home from the hospital;

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- Transportation charges, other than approved ambulance service;
 - Physiotherapy services rendered by private physiotherapy facilities;
 - Medical examinations or certificates required for applications for employment or the continuance of employment, life insurance, or admission to camps or recreational activities;
 - Cosmetic surgery, except with prior OHIP approval;
 - Acupuncture;
 - Psychological testing, except in hospital;
 - Any health service other than those provided by approved hospitals or practitioners.

Note: Although OHIP benefits apply to home care services in Ontario, these services are not covered outside the province.

Submitting claims for medical services

For reimbursement of your medical bills from OHIP, you must submit your claim and original receipt to your local OHIP office within six months of the date of treatment.

If you have private insurance to supplement your OHIP coverage, send your claim to OHIP first. Then submit a claim for costs not covered by OHIP to your private insurance plan.

OHIP can reimburse you more quickly if you provide a translation of bills written in languages other than English or French.

In submitting your claim, include the following:

Personal information

- The family name and initials, and the OHIP number shown on your OHIP identification card;
- Your Ontario address and, if different, the address to which payment should be sent, and your daytime telephone number;
- The patient's name, sex, date of birth and relationship to the OHIP subscriber;
- The reason for being out of Ontario (e.g., vacation, business trip or other temporary absence).

Information from your doctor

- The full name, address and telephone number of the doctor or other practitioner;
- The diagnosis of the illness or injury;
- The description of all medical services provided;
- The dates and number of services;
- The fee charged for each service.

Submitting claims for hospital services

Submit the itemized statement issued by the hospital, including the dates of the patient's admission to hospital and discharge. Time spent on administration of anesthesia, or assistance at surgery, should be obtained from the hospital and included. Also include the referring physician's name and, if required, a medical certificate.

If you have private insurance to supplement your OHIP coverage, send your claim to OHIP first. Then submit a claim for costs not covered by OHIP to your private insurance plan.

Remember that health care costs outside the province are often higher than in Ontario, so before you leave, obtain private insurance to cover additional costs.

Note: Included in this booklet is a card that lists details OHIP will need when you submit claims for health care outside Ontario. It can be kept in your wallet when you travel outside Ontario, so that you can refer to it should the need arise.

Ontario's Drug Benefit

If you are eligible for Ontario's Drug Benefit, and plan to travel outside Ontario, the following information will be of interest to you.

Prescriptions purchased outside of Ontario are not eligible for reimbursement by Ontario's Drug Benefit. Please discuss this with your physician or pharmacist. If you have a valid Senior Citizen's Privilege Card, you can make arrangements to receive up to a six-month supply of your prescribed drug before you leave. If you have a valid monthly eligibility card, you can receive up to a month's supply in the month for which your card is valid.

You may wish to obtain private insurance to cover the costs of any medications obtained outside Ontario.

If you move outside Ontario permanently, you are no longer eligible for Drug Benefit.

OHIP offices

Always quote your Ontario Health Insurance number when contacting OHIP.

Zenith numbers are toll free. Dial the operator and give the Zenith number listed below:

The 1-800 numbers are toll free if calling from the same area code.

Barrie*

30 Poyntz Street
L4M 3P2
Tel: (705) 726-0326
1-800-461-7597

Hamilton

119 King Street West
L8P 4T9
Tel: (416) 521-7100
1-800-263-2197

(from Area 416)
1-800-263-2162 or
1-800-263-2187
(from Area 519)

Kenora*

100 Main Street South
P9N 1S9
Tel: (807) 468-9554
Zenith 69100

Kingston

1055 Princess Street
K7L 5T3
Tel: (613) 546-3811
1-800-267-0933

Kitchener*

665 King Street East
N2G 2M4
Tel: (519) 745-8421
Zenith 96420

London

227 Queen's Avenue
N6A 1J8
Tel: (519) 433-4561
1-800-265-4703

Mississauga

201 City Centre Drive
L5B 2T4
Tel: (416) 275-2730
Zenith 96420

Oshawa

Executive Tower
Oshawa Centre
419 King Street West
L1J 7J2
Tel: (416) 576-2870

1-800-263-3953
(from area 705)
1-800-263-3814
(from area 416)

Ottawa

75 Albert Street
K1P 5Y9
Tel: (613) 566-2740
1-800-267-1912

Owen Sound*

1043A 2nd Avenue East
N4K 2H8
Tel: (519) 376-6447
1-800-265-3190
(from area 519)

Peterborough*

139 George Street North
K9J 3G6

Tel: (705) 743-2140

Zenith 96420

St. Catharines*

59 Church Street
L2R 3C3

Tel: (416) 682-6658

Zenith 96420

Sarnia*

452 Christina Street North
N7T 5W4

Tel: (519) 337-3667

Zenith 69100

Sault Ste. Marie*

205 McNabb Street
P6B 1Y3

Tel: (705) 759-8598

Zenith 96420

Sudbury

199 Larch Street
P3E 5R1

Tel: (705) 675-4261

1-800-461-4006

Thunder Bay

435 James Street South
P7E 6E3

Tel: (807) 475-1351

Zenith 96420

Timmins*

38 Pine Street North
101 Mall, Suite 110

P4N 6K6

Tel: (705) 267-1164

Zenith 96420

Toronto

2195 Yonge Street
(at Eglinton)

M4S 2B2

Tel: (416) 482-1111

Special Services Unit*

7 Overlea Blvd.

Toronto

M4H 1A8

Tel: (416) 965-1000

Windsor*

1427 Ouellette Avenue
N8X 1K1

Tel: (519) 258-7560

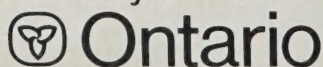
Zenith 69100

**Information office only. No claims processed.*

All information in this booklet is subject to the current provisions of the Ontario Health Insurance Act and Regulations.

On peut obtenir la version française de ce livret auprès des bureaux de l'OHIP.

Ministry of Health



Alan W. Pope, Minister

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